U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

1. File Number U - 2

Name and address of person filing.

Ε

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L-86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

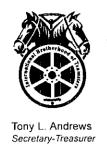
11/1/2004 Through: 12/31/2004

4. Name, file number, and address of labor organization.

Name Bradley W Harrison	Name Teamsters Local Union No 305
Name Bradley W Harrison	and the second s
	Labor Organization File Number 005-158
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 1870 NE 162nd Avenue	Street 1870 NE 162nd Avenue
City Portland	City Portland
State Oregon ZIP Code + 497230-564	2 State   Oregon   ZIP Code + 4 97230 - 564
	tative
A Mand an interest in congrand in transactions (including logos) with Of	sions set forth in the instructions): derived income or other economic benefit of
monetary value from an employer whose or ployees your organizati	on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.
6. Name and address of Employer (including trade name, if any).	1.a. Nature of interest, Transaction, of meeting
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	
City	
State ZIP Code + 4	
Sign	nature
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompan undersigned's knowledge and belief, true, correct, and complete. (See the se	Perjury and other applicable penalties of the law, that all of the information ving documents), has been examined by the signatory and is, to the best of the
Signed Bradley W. Hoennison	On 8/15/2005 503-251-2305  Date Telephone Number
	Date Telephone Humos
Form LM-30 (2003)	Page 1 of

•		
Name of Person Filing Bradley W Harrison	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, setting or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or settling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).  Name Oregon Teamster Employers Trust  Trade Name, if any: w/o William C Earhart Co  P.O. Box, Bldg., Room No., if any P O Box 4148  Street 3140 NE Broadway  City Portland  State Oregon ZIP Code + 4 97208-18	a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing.	
Street	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest had or income received.	
State ZIP Code + 4	Direct expenditure for International Foundation Conference.	
	12.b. Amount. 1,900.00	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Flelations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		

Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.



## Dairy, Bakery & Food Processors, Industrial, Technical & Automotive, Local Union No. 305

Affiliated with The International Brotherhood of Teamsters
1870 N.E. 162nd AVENUE • PHONE (503) 251-2305 • FAX (503) 251-2301
PORTLAND, OREGON 97230-5642

(4)

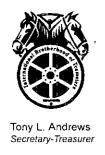
August 15, 2005

The transactions, dealings and interests that are reported in the attached LM-30 represent my good faith effort to reconstruct any reportable occurrences for calender year 2004. Some items may have been unintentionally omitted. If, in the future, it comes to my attention that there is a matter which should have been reported for calendar year 2004, I will file an amended Form LM-30.

Signed,

**Brad Harrison** 

Business Representative



## Dairy, Bakery & Food Processors, Industrial, Technical & Automotive, Local Union No. 305

Affiliated with The International Brotherhood of Teamsters

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PORTLAND, OREGON 97230-5642

August 15, 2005

Office of Labor-Management
US Department of Labor
200 Constitution Avenue NW, Room N5616
Washington DC 20210

RE: 2004 LM-30 Report

Dear Sir:

Enclosed you will find my LM-30 report for year ending 2004.

Very truly yours,

**Brad Harrison** 

Business Representative

TLA/sm Enclosure

Certified Letter #: 7004 1160 0006 1631 1463